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B1 (Official Form 1)(04/13)			D0	cument	ıα	gc I o	00				
	United S Nor			ruptcy ( of Illinoi					Volunta	ry P	etition
Name of Debtor (if individual, en Ashley, Angelique	ter Last, First,	Middle):			Name	of Joint De	ebtor (Spouse	(Last, First,	Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  AKA Angelique Price							used by the J maiden, and		n the last 8 years		
Last four digits of Soc. Sec. or Inc (if more than one, state all)  xxx-xx-3425	lividual-Taxpa	yer I.D. (IT	ΓIN)/Com	plete EIN		our digits o		Individual-T	axpayer I.D. (ITII	N) No./(	Complete EIN
Street Address of Debtor (No. and 55 E 136th St.; #2 Riverdale, IL	Street, City, a	and State):			Street	Address of	Joint Debtor	(No. and Stre	eet, City, and Stat	e):	
County of Residence or of the Prin	ncipal Place of	Business:		ZIP Code 60827	Count	y of Reside	ence or of the	Principal Pla	ce of Business:		ZIP Code
Mailing Address of Debtor (if diff	erent from stre	eet address)	):		Mailir	ng Address	of Joint Debt	or (if differen	t from street addr	ess):	
Location of Principal Assets of Bu	isiness Debtor		Γ	ZIP Code							ZIP Code
(if different from street address ab											
(Form of Organization) (Check  Individual (includes Joint Deb See Exhibit D on page 2 of this for Corporation (includes LLC and Partnership Other (If debtor is not one of the check this box and state type of en  Chapter 15 Debtor Country of debtor's center of main interest.	tors) m. d LLP) above entities, tity below.) s erests:	☐ Single in 11 ☐ Railro ☐ Stock ☐ Comn ☐ Cleari ☐ Other ☐ Debtor	h Care Bu e Asset Re U.S.C. § oad broker modity Bre ing Bank  Tax-Exe (Check box r is a tax-ex	eal Estate as of 101 (51B)  oker  mpt Entity  i, if applicable) tempt organiza	tion	defined	er 7 er 9 er 11 er 12	Ch of: Ch of: Ch of: Chest of: Nature (Check onsumer debts, § 101(8) as		for Reco roceedin for Reco in Proce	ng ognition eding
Filing Fee (Comparison of the comparison of the	Check one box as (applicable to burt's considerati in installments. I	Code ( ) individuals of on certifying Rule 1006(b) 7 individuals	only). Must g that the ). See Office s only). Mu	Check al  Check al  Check al  Check al  Check al  A  BB.	ne box: ebtor is a sr ebtor is not ebtor's aggre e less than!	a personnall business a small business a field with of the plan w	Chap debtor as definess debtor as contingent liquida amount subject this petition.	household purpoter 11 Debto ned in 11 U.S.C defined in 11 U atted debts (excl to adjustment of	rs	y three ye	ears thereafter).
Statistical/Administrative Inform  ☐ Debtor estimates that funds wi ☐ Debtor estimates that, after any there will be no funds available  Estimated Number of Creditors ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	ll be available vexempt prope for distribution	for distributerty is excluded on to unsec	ution to ui uded and	administrativ litors.	litors.	es paid,	OVER	THIS	SPACE IS FOR CO	URT USI	E ONLY
1- 49 99 199  Estimated Assets  □ 50 to \$50,001 to \$100,000 to \$500,000	999 :	\$1,000,001 to \$10	5,001- 10,000 \$10,000,001 to \$50 million	25,000 \$50,000,001 to \$100	25,001- 50,000 \$100,000,001 to \$500 million	100,000	100,000  More than				
Estimated Liabilities	\$500,001	\$1,000,001	\$10,000,001 to \$50	\$50,000,001	\$100,000,001 to \$500	\$500,000,001 to \$1 billion					

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): **Voluntary Petition** Ashley, Angelique (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Date Filed: Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Thomas P Twomey September 26, 2015 Signature of Attorney for Debtor(s) (Date) Thomas P Twomey 6273191 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Page 3 of 80 Document **B1** (Official Form 1)(04/13)

	Vo	luntary	Petition
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(This page must be completed and filed in every case)

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Angelique Ashley

Signature of Debtor Angelique Ashley

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 26, 2015

Date

#### Signature of Attorney\*

X /s/ Thomas P Twomey

Signature of Attorney for Debtor(s)

Thomas P Twomey 6273191

Printed Name of Attorney for Debtor(s)

Zalutsky & Pinski, Ltd.

Firm Name

111 W. Washington

Suite 1550

Chicago, IL 60602

Address

Email: admin@ZAPLawFirm.com

312-782-9792 Fax: 312-782-0483

Telephone Number

September 26, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s): Ashley, Angelique

#### Signatures

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

In re	Angelique Ashley		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
± • • •	109(h)(4) as impaired by reason of mental illness or mental nd making rational decisions with respect to financial
unable, after reasonable effort, to participate i through the Internet.);	109(h)(4) as physically impaired to the extent of being n a credit counseling briefing in person, by telephone, or
☐ Active military duty in a military co	omoat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Angelique Ashley
	Angelique Ashley
Date: September 26, 2	2015

В

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court**Northern District of Illinois

In re	Angelique Ashley		Case No.	
-		Debtor	,	
			Chapter	7
			•	

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	3,712.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		1,650.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	30		196,507.32	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,782.74
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,767.00
Total Number of Sheets of ALL Schedules		43			
	To	otal Assets	3,712.00		
			Total Liabilities	198,157.32	

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B 6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Angelique Ashley		Case No.	
-		Debtor	,	
			Chapter	7

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	39,146.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	39,146.00

#### State the following:

Average Income (from Schedule I, Line 12)	3,782.74
Average Expenses (from Schedule J, Line 22)	3,767.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	4,320.51

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		1,150.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		196,507.32
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		197,657.32

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B6A (Official Form 6A) (12/07)

In re	Angelique Ashley	Case No
		Debtor

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Property Wife, Joint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Angelique Ashley	Case No.	
		Debtor,	

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Χ			
2.	Checking, savings or other financial	Check	ing & Savings - Bank of America	-	412.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Navy I	Federal - Savings	-	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	5 Roo	ms	-	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	Clothe	s	-	800.00
7.	Furs and jewelry.	Χ			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10	Annuities. Itemize and name each issuer.	X			
				Sub-Tota	al > 2,212.00

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In	re Angelique Ashley		Case	No	
			Debtor ,		
		SCH	HEDULE B - PERSONAL PROPERTY (Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Х			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	th w	00% ownership in Midwest Property Connectors nis is a business Debtor started in 2014. The purpose was to be for real estate investment but no purchases have been made.	-	0.00
14.	Interests in partnerships or joint ventures. Itemize.	Χ			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	Х			
16.	Accounts receivable.	Χ			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	Х			
18.	Other liquidated debts owed to debtor including tax refunds. Give particular		expected Income Tax Refund less credits	-	1,500.00

Sheet \_ 1 \_ of \_ 2 \_ continuation sheets attached

19. Equitable or future interests, life estates, and rights or powers

20. Contingent and noncontingent

policy, or trust.

exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.

interests in estate of a decedent, death benefit plan, life insurance

21. Other contingent and unliquidated

claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. Χ

Χ

Χ

1,500.00

Sub-Total >

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In re	Angelique Ashley	Case No.
		<del>,</del>

Debtor

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	Χ			
26.	Boats, motors, and accessories.	Χ			
27.	Aircraft and accessories.	Χ			
28.	Office equipment, furnishings, and supplies.	Χ			
29.	Machinery, fixtures, equipment, and supplies used in business.	Χ			
30.	Inventory.	Χ			
31.	Animals.	Χ			
32.	Crops - growing or harvested. Give particulars.	Χ			
33.	Farming equipment and implements.	Χ			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

 $\begin{array}{ccc} \hline Sub\text{-Total} > & 0.00 \\ (Total of this page) & \\ \hline Total > & 3,712.00 \\ \hline \end{array}$ 

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Angelique Ashley	Case No
		,
		Debtor

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, Certif Checking & Savings - Bank of America	ficates of Deposit 735 ILCS 5/12-1001(b)	412.00	412.00
Household Goods and Furnishings 5 Rooms	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Wearing Apparel Clothes	735 ILCS 5/12-1001(a)	100%	800.00
Other Liquidated Debts Owing Debtor Including Tax R Expected Income Tax Refund less credits	<u>efund</u> 735 ILCS 5/12-1001(b)	1,500.00	1,500.00

Total: 3,712.00 3,712.00

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B6D (Official Form 6D) (12/07)

In re	Angelique Ashley	Case No.	
_		Debtor	

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

					_			
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH-ZGEZ	UZ LL QULDA		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.		Г	PMSI	7	DATED	H		
Progressive Finance 11629 S 700 East Ste. 250 Draper, UT 84020		-	Livingroom and Bedroom Set		D			
	_	╀	Value \$ 500.00	+		Н	1,650.00	1,150.00
Account No.			Value \$  Value \$					
Account No.								
			Value \$					
continuation sheets attached			(Total of	Subt			1,650.00	1,150.00
			(Report on Summary of S		ota ule		1,650.00	1,150.00

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B6E (Official Form 6E) (4/13)

•				
In re	Angelique Ashley		Case No.	
-		Debtor	_,	

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report thi total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Angelique Ashley	Case No.
		Debtor

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H	CONSIDERATION FOR CLAIM. IF	O AND F CLAIM ΓΑΤΕ.	CONTINGENT	UNLIQUIDAT	D I S P U T E D	AMOUNT OF CLAIM
Account No.					N T	A T E D		
Aarons Furniture 2231 E 95th St Chicago, IL 60617		-						973.00
Account No.		1						
Aarons Sales & Lease 122 S. Bolingbrook Drive Bolingbrook, IL 60440		-						898.00
Account No.		+					<u> </u>	
Accelerated Rehab Center LTD 24014 Renwick Road Plainfield, IL 60544		-						
								80.00
Account No. 2179034251  Acs/bank Of America 501 Bleecker St Utica, NY 13501		-	Opened 1/01/98 Last Active 12/06/05 Educational					0.00
_29_ continuation sheets attached				S (Total of th		l tota pag		1,951.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

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CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	၂င္က၂	U	P	
MAILING ADDRESS	CODEBTOR	Н	DATE OF A RANGE DIGHT DEPARTMENT	LVOO	DZLLQDL	s	
INCLUDING ZIP CODE,	l E	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	1/J	Q	۱۲	
AND ACCOUNT NUMBER	Ţ	J	IC CUDIECT TO CETOEE CO CTATE	N	Ü	Ţ	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subject to setort, so state.	NGENT	Þ	5	
Account No.		t		N	DATED		
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Advocate Health Care					i		
836 W. Wellington Avenue		-			ĺ		
Chicago, IL 60657-5193					ĺ		
Simoage, 12 00007 0100					i		
							60.00
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Account No.	1						
AFLAC							
AFLAC					i		
1932 WYNNTON ROAD		-			i		
Columbus, GA 31999					ĺ		
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							1,716.00
Account No.				$\forall$		T	
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Allstate					i		
75 Executive		-			i		
Hudson, OH 44237					i		
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					ĺ		278.00
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Account No.	1		Collection				
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Alverno Parkway Institute					i		
Credtrs Coll		-			i		
Po Box 63					i		
Kankakee, IL 60901					ĺ		
							100.00
Account No.	╅	t		${}$		H	
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American Express	1					l	
P.O. Box 360002	1	-			ĺ		
Ft. Lauderdale, FL 33336-0002	1				ĺ		
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						1	200.00
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Sheet no. 1 of 29 sheets attached to Schedule of			S	Subt	ota	.1	2 254 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	ge)	2,354.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Н	Husb	pand, Wife, Joint, or Community	CO	U N	D	ग	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	٧	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	O N H L N G H N H	NL-QU-DATED	I SPUTED	3 J T	AMOUNT OF CLAIM
Account No.					'	Ę			
Apollo Group P.O. Box 25727 Shawnee Mission, KS 66225		-				D			857.00
Account No.			T				Γ	T	
APPLIED BANK PO BOX 17120 Wilmington, DE 19886		-							199.00
Account No. 4227093372334585		H	١,	Opened 1/01/13 Last Active 10/31/13	H		H	+	
Applied Card Bank Attention: Bankruptcy Po Box 17125 Wilmington, DE 19850		-		Credit Card					199.00
Account No.		T					T	7	
Army/Air Force Exchange P.O. Box 650410 Dallas, TX 75265-0410		-							502.00
Account No.		T	$\dagger$				T	7	
Ascension Services, Inc. P.O. Box 210278 Bedford, TX 76095		-							1,093.94
Sheet no. 2 of 29 sheets attached to Schedule of				2	Subt	ota	ıl	7	2,850.94
Creditors Holding Unsecured Nonpriority Claims				(Total of t	his 1	pag	ze)	) I	2,000.04

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.
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DATE CLAIM WAS INCURED AND INCLAIM TO CONSIDERATION POR CLAIM TO CLAIM TO CAME TO CLAIM TO CLAIM TO CLAIM TO CLAIM TO CAME TO CLAIM TO CAME TO CLAIM TO CAME TO CLAIM TO CAME TO		l c	Н	sband, Wife, Joint, or Community	I c	ш	Ь	
Representing:   Account No.   T   1   1   1   1   1   1   1   1   1	INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ODEBTO	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	11	ŀ	SPUTE	AMOUNT OF CLAIM
Representing:	, ,	R	Ľ		- R N T	D A T	D	
AT&T P.O. Box 8212 Aurora, IL 60572-8212  - Account No.  AUM 135 S. LaSalle St. Dept 8011 Chicago, IL 60674  - Opened 4/01/14 Collection  - Ball State Universityar1 Security Credit System 622 Main St Ste 301 Buffalo, NY 14202  - Account No.  Black Enterprise National Publication Billing Servic 1525 S Escondido Blvd., Ste D Escondido, CA 92025	Flexpay Plus Monterey Collection Sv 4095 Avenida De La					E D		Notice Only
P.O. Box 8212 Aurora, IL 60572-8212	Account No.			Collection				
Account No.  AUM 135 S. LaSalle St. Dept 8011 Chicago, IL 60674	P.O. Box 8212		-					
AUM 135 S. LaSalle St. Dept 8011 Chicago, IL 60674								56.70
135 S. LaSalle St. Dept 8011 Chicago, IL 60674	Account No.	-						
Account No. 2927160  Ball State Universityar1 Security Credit System 622 Main St Ste 301 Buffalo, NY 14202  Account No.  Black Enterprise National Publication Billing Servic 1525 S Escondido Blvd., Ste D Escondido, CA 92025  Opened 4/01/14 Collection  2,951.00	135 S. LaSalle St. Dept 8011		-					238 00
Ball State Universityar1 Security Credit System 622 Main St Ste 301 Buffalo, NY 14202  Account No.  Black Enterprise National Publication Billing Servic 1525 S Escondido, CA 92025  Collection  - Collection  - Collection  - Collection  - Collection	Account No. 2927160	╁	_	Opened 4/01/14	+			200.00
Black Enterprise National Publication Billing Servic 1525 S Escondido Blvd., Ste D Escondido, CA 92025	Ball State Universityar1 Security Credit System 622 Main St Ste 301		-					2,951.00
National Publication Billing Servic  1525 S Escondido Blvd., Ste D Escondido, CA 92025	Account No.				$\dagger$			
<b>I</b>	National Publication Billing Servic 1525 S Escondido Blvd., Ste D		-					22.00
Sheet no. 3 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Subtotal (Total of this page)								3,267.70

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.
•		Debtor

							_	
CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community		U	P	1	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	LLQULDA	D I SPUTED	5	AMOUNT OF CLAIM
Account No. 5178057840748847		T	Opened 4/01/13 Last Active 10/31/13	<b> </b>	Ϊ́Ε		Ī	
Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130		-	Credit Card		D			0.00
Account No.						T	1	
Cash America 1600 West 7th Street Fort Worth, TX 76102		-						647.00
Account No.	╀	-		-		╀	4	047.00
CD One Price Cleaners P.O. Box 213 Bankruptcy Dept Streator, IL 61364		-						44.00
Account No.						T	1	
Chase P.O. Box 52195 Phoenix, AZ 85072-2195		-						185.00
Account No.	T	t	Collection	T		T	1	
Chicago Christian Council c/o Receivables Management 18241 West St. Lansing, IL 60438		-						60.00
Sheet no. 4 of 29 sheets attached to Schedule of		_		Sub	tota	<u> </u>	7	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	)	936.00

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In re	Angelique Ashley	Case No.
•		Debtor

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS INCLUDING ZIP CODE.	CODEBTOR	H W		N T	L	DISPUTE	
AND ACCOUNT NUMBER	B T	J	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q U	U T	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	NGENT	Ď	E D	
Account No.	T	T		₩	TED		
	1				D	⊢	_
Chicago Cosmetic Surgery and Derm 2340 N. Clybourn		L					
Chicago, IL 60614							
							30.00
Account No. 21790342522		T	Opened 1/01/10 Last Active 9/30/10			T	
			Educational				
Citistudntln Po Box 95		L					
Sioux Falls, SD 57117							
							Unknown
Account No. 21790342523			Opened 1/12/10 Last Active 6/30/10			Г	
			Educational				
Citistudntln Po Box 95		L					
Sioux Falls, SD 57117							
,							
							0.00
Account No. a24001477854			Tickets				
City of Chicago							
Department of Revenue		-					
121 N. LaSalle St. Rm. 107A							
Chicago, IL 60602							
							900.00
Account No.							
Comcast							
c/o Credit Protection Association	1	-					
13355 Noel Road	1						
Dallas, TX 75240	1						
						L	664.00
Sheet no. <u>5</u> of <u>29</u> sheets attached to Schedule of				Subt			1,594.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	(e)	1,554.50

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

		_					
CREDITOR'S NAME,	C	Н	lusband, Wife, Joint, or Community		U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	LLQULDA	DISPUTED	AMOUNT OF CLAIM
Account No.			Utility	]⊤	T E		
ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181		-			D		642.00
Account No.		T				T	
Comprehensive Imaging Assoc C/O CCSI PO BOX 10428 Merrillville, IN 46411		-					30.00
	L	╀		oppi		_	30.00
Account No.  Continental Finance PO BOX 30311 Tampa, FL 33630		-					550.00
Account No.				T			
DEMG 1734 N Long Chicago, IL 60639		-					34.00
Account No. 217903	T	T		T		t	
DFAS-CL 1240 E 9th St Cleveland, OH 44199		-					2,303.00
Sheet no. 6 of 29 sheets attached to Schedule of				Subt	tota	ıl	3,559.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	3,339.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
	-	Debtor	

	Ic	ш	sband, Wife, Joint, or Community		_	11	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED A CONSIDERATION FOR CLAIM. IF CI IS SUBJECT TO SETOFF, SO STAT	ND LAIM ΓE.	ZMDZ-4ZOUZ	021-00-04-60		AMOUNT OF CLAIM
Account No.					Т	T E		
Diners cITIBANK sd P.O. Box 6009 The Lakes, NM 88901		-				D		4,969.00
Account No. 92754385321E00220090120	╁	H	Opened 1/20/09 Last Active 4/19/11			_		
Dpt Ed/slm Po Box 9635 Wilkes Barre, PA 18773		-	Educational					0.00
Account No. 92754385321E00120090120	-		Opened 1/20/09 Last Active 4/19/11					0.00
Dpt Ed/slm Po Box 9635 Wilkes Barre, PA 18773	-	-	Educational					0.00
Account No. 92754385321E00320080109	-	$\vdash$	Opened 1/09/08 Last Active 4/19/11					
Dpt Ed/slm Po Box 9635 Wilkes Barre, PA 18773	-	-	Educational					0.00
Account No. 92754385321E00420080109			Opened 1/09/08 Last Active 4/19/11					
Dpt Ed/slm Po Box 9635 Wilkes Barre, PA 18773		-	Educational					0.00
Sheet no. 7 of 29 sheets attached to Schedule of		•				ota		4,969.00
Creditors Holding Unsecured Nonpriority Claims			(	Total of th	1S ]	pag	e)	1,2233

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley		Case No.	
-		Debtor	<del>-</del> /	

CDEDITORIO NA ME	С	Hu	sband, Wife, Joint, or Community	C	U N	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	L	DISPUTED	AMOUNT OF CLAIM
Account No.			Collection	٦т	E		
Duvera Billing P.O. Box 2549 Carlsbad, CA 92018		-			D		400.00
Account No.				+	+	<u> </u>	400.00
Emergency Medical OPhy of Cook Cty 900 Oakmont Lane Ste 200 Westmont, IL 60559		-					478.00
Account No. D41526875N1			Opened 3/01/13	+	$^{+}$		
Emp Of Cook County Llc Commonwealth Financial 245 Main Street Scranton, PA 18519		-	Collection				477.00
Account No. 3537923			Opened 2/01/10	+	+		
Fair Collections & Outsourcing 12304 Baltimore Ave Suite E Beltsville, MD 20705		-	Collection Attorney Mansards				2,462.00
Account No.			Collection	+	<u> </u>		2,402.00
Fingerhut 16 McLeLand Road Saint Cloud, MN 56303-2198		-					123.00
Sheet no. <u>8</u> of <u>29</u> sheets attached to Schedule of	<u> </u>			Sub	ntot:	1 a1	.23.00
Creditors Holding Unsecured Nonpriority Claims			(Total o				3,940.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No	
		Debtor	

CREDITOR'S NAME,	CO	Ηι	usband, Wife, Joint, or Community		U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		CONFINGEN	LLQULDATED	D I S P U T E D	AMOUNT OF CLAIM
Account No. 1512089627820				T	E		
First Family Financial Svcs 721 Front St Meridian, MS 39301		-			D		442.00
Account No.			Credit Card Purchases	$\vdash$	H		
First National Bank of Marin P O Box 80015 Bankruptcy Dept. Los Angeles, CA 90080-0015		-					268.00
Account No.			Credit Card	$\vdash$			
First Premeir Bank Post Office Box 5147 Bankruptcy Department Sioux Falls, SD 57117-5147		-					289.00
Account No.							
Fitness Magazine 1716 Locust St Des Moines, IA 50309-8023		-					17.00
Account No. 1000432210			5/98	+		$\vdash$	
Ford Credit PO Box 6508 Mesa, AZ 85216		-	Deficiency				Unknown
Sheet no. 9 of 29 sheets attached to Schedule of				Sub	tota	ıl	1,016.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,010.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No	
		Debtor	

	С	Н	sband, Wife, Joint, or Community	To	Τu	Гр	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L Q	DISPUTED	AMOUNT OF CLAIM
Account No.			Cookie Program	٦т	T E D		
Girl Scouts of Greater Chicago 222 S Riverside Plaza Ste 2120 Chicago, IL 60606		-					528.00
Account No.				+			
Great Lakes Higher Education 2401 International Lane Madison, WI 53701		-					24,155.00
Account No. 11804C	-	$\vdash$	Opened 2/16/14 Last Active 4/13/15	+	+		,
Gtr Chgo Fin 8331 W Roosevelt R Forest Park, IL 60130		-	Automobile				6,746.00
Account No. 90918BE		H	Opened 6/04/10 Last Active 12/08/12	+			,
Gtr Chgo Fin 8331 W Roosevelt R Forest Park, IL 60130	-	-	Automobile				0.00
Account No.			Service	+	+	-	
H & R Block 120 W. 87th St. Chicago, IL 60620		-					216.00
Sheet no. 10 of 29 sheets attached to Schedule of			1	Sub	tot	al	24 645 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pa	ge)	31,645.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	H	usband, Wife, Joint, or Community	C	Ü	Ŀ	٦Т	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	NL QU L DAT	D I S P U T E D	= 1	AMOUNT OF CLAIM
Account No. 21791479		Г	Opened 7/01/15	]⊤	T E D			
Harvard Collection Harvard Collection Services 4839 N Elston Avenue Chicago, IL 60630		-	Collection Attorney II Dept Of Human Svcs		D			1,653.00
Account No.		Г			Г	T	T	
Hidden Pictures Playground PO BOX 4002862 Des Moines, IA 50340		-						20.00
Account No.	╁	+		$\vdash$	H	$\dagger$	+	
Hoosier Heathwise PO BOX 171379 Salt Lake City, UT 84117		-						99.00
Account No.	T	T			T	Ť	†	
Household/Orchard Bank C/O Midland Credit Mgmt PO BOX 939019 San Diego, CA 92193		-						1,999.00
Account No.		T	Collection			T	7	
Illinis Dept of Healthcare and Family Services P.O. Box 19405 Springfield, IL 62794		-						1,653.00
Sheet no. 11 of 29 sheets attached to Schedule of				Sub	tota	al	7	E 424.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ge)	١(	5,424.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
_		Debtor	

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community		U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	LLQULDA	DISPUTED	AMOUNT OF CLAIM
Account No.		Г	Tolls	]⊤	T		
Illinois Tollways 2700 Ogden Ave. Downers Grove, IL 60515		-			D		14,500.00
Account No.		T		$\top$	Т		
Illinois Secretary of State Safety and Financial Responsibility 2701 S. Dirksen Pkwy Springfield, IL 62723			Representing: Illinois Tollways				Notice Only
Account No.			Collection				
Impenal Parking P.O. Box 369 Concord, CA 94522		-					50.00
Account No.			Medical	T	Г		
Ingalls Memorial Hospital P.O. Box 75608 Chicago, IL 60675-5608		-					1,159.00
Account No. D88532N1	T	T	Opened 8/01/12	T	T	T	
Innovative Merchant Solutions Consolidated Rcvy Grp 425 W 5th Ave Ste 103 Escondido, CA 92025		-	Collection				307.00
Sheet no. 12 of 29 sheets attached to Schedule of	•			Subt	tota	ıl	16.016.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	16,016.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.
•		Debtor

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	Ç	Ü	T.	Л	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	NL I QU I DAT	D I SPUTED	; ; ;	AMOUNT OF CLAIM
Account No.				T	T E D			
Jewels by Park Lane c/o World-Wide Recovery Services Inc., 3100 S. Wells St. Chicago, IL 60616		-			D			151.00
Account No.		T				T	Ť	
Kahuna Payment Solutions 801 W Chestnut St Suite C Bloomington, IL 61701		-						0.00
Account No.	۲				$\vdash$	t	$\dagger$	
Kinney Closed 438 East 75th Street Chicago, IL 60619		-						157.00
Account No.						T	T	
LA Fitness P.O. Box 51355 Irvine, CA 92619-1355		-						10.00
Account No. 40103		T	Collection acct.			T	†	
LJ Ross P.O. Box 1838 Ann Arbor, MI 48104		-						29.00
Sheet no13_ of _29_ sheets attached to Schedule of				Subt			†	347.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ze)	١l	347.00

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In re	Angelique Ashley	Case No.	
-		Debtor	

					_	_	_	
CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community		U	P	1	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	J H	CONSIDERATION FOR CLAIM. IF CLAIM	CONTING	UNLLQUL	SPUTE		AMOUNT OF CLAIM
(See instructions above.)	R	С		NGENT	D A T	5	5	
Account No.	T	T		77	T E D		İ	
				$\vdash$	D	╀	4	
Lorch Diamond Center							1	
1701 McFarland Blvd E # 199		-					1	
Tuscaloosa, AL 35404							1	
								570.00
Account No.		t		$\dagger$	H	t	+	
							1	
Mansard Ltd.							1	
315 W. Bedford Morris, IL 60450		-					1	
Worns, IL 60450							1	
								2,462.00
Account No.		T		$\top$	T	t	1	
	1						1	
Marshalls							1	
PO BOX 9382		-					1	
Framingham, MA 01701							1	
							1	20.00
Account No. 1000432	-	H	Deficiency	+	┝	-	+	20.00
7.ccount 110. 1000402			Deliciency				1	
Mazda American Credit							1	
Dept. 5558901		-					1	
P.O. Box 550000							1	
Detroit, MI 48255							1	
							1	7,950.00
Account No.							1	
Mazda American Credit			Poproconting					
1 S Limestone St			Representing: Mazda American Credit					Notice Only
Ste 100			Wazaa / mencan orean			1		Notice Offig
Springfield, OH 45502								
Sheet no. 14 of 29 sheets attached to Schedule of	-	_		Subt	tota	al	7	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	paş	ge)	) [	11,002.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	00	U	D	·Τ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	ONT I NG ENT	L   Q	SPUTED	5	AMOUNT OF CLAIM
Account No.			Collection	T	T E D			
MEA Sullivan PO BOX 5990, DEPT 20-6003 Carol Stream, IL 60197		_			D			83.00
Account No. D60510965N1			Opened 10/01/14		Т	T	†	
Mea-Sullivan Commonwealth Financial 245 Main Street Scranton, PA 18519		_	COLLECTION					83.00
Account No.	t	t		t	H	t	$\dagger$	
Medical Reimbursement of America 15234 South Harlem Avenue Lower Level Orland Park, IL 60462	-	_						6,217.00
Account No.					T	T	†	
Meijer P.O. Box 1 Grand Rapids, MI 49501		_						278.00
Account No. 000000008159		T	Collection		T	T	†	
Merchants Recovery Bureau 3817 Harrison Ave. Cincinnati, OH 45211		_						48.00
Sheet no. <u>15</u> of <u>29</u> sheets attached to Schedule of				Sub	tota	al	†	6,709.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ge)	ı۱	6,709.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley		Case No.	
_		Debtor	<del>-</del> /	

CDEDITODIC NAME	Ç	Н	sband, Wife, Joint, or Community		CO	U N	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C	DATE CLAIM WAS INCURRED	CLAIM	ONTINGEN	NLIQUIDATED	I SPUTED	AMOUNT OF CLAIM
Account No.					Т	T		
Mid- American PSYCH & COUNS 1170 E. Belvidere Rd; #203 Grayslake, IL 60030		-				D		160.00
Account No.			Collection Account					
Midland Credit Management P.O. Box 939019 San Diego, CA 92193-9019		-						982.00
Account No. 1020000914		H	Opened 10/28/06 Last Active 10/12/07					
Mwstrn Fincl 8100 West 159th St Orland Park, IL 60462		-	Automobile					Unknown
Account No. 92754385321000220070727			Opened 7/01/07 Last Active 8/31/15					
Navient Po Box 9500 Wilkes Barre, PA 18773		_	Educational					39,146.00
Account No. 6019452200002		T	Credit Card		$\vdash$	H		
Nexcard 3911 S Walton Walker Blvd Dallas, TX 75265		_						503.00
Sheet no. 16 of 29 sheets attached to Schedule of				S	ubt	tota	.1	40.704.00
Creditors Holding Unsecured Nonpriority Claims				(Total of th	nis	pag	re)	40,791.00

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In re	Angelique Ashley	Case No	
		Debtor	

CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community	C	U	D	T	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M		CONTINGENT	Z L L Q U L D A I	DISPUTED	, L	AMOUNT OF CLAIM
Account No.				T	T E D			
Nicor P.O. Box 2020 Aurora, IL 60507-2020		-			D		-	48.00
Account No.							Т	
Northwestern M.F. Foundation Inc. 680 North Lake Shore Drive Chicago, IL 60661		-						35.00
Account No.	l	T					$^{+}$	
Norwood University	-	-						2,986.00
Account No. 1400032	╁	H	Credit Card	T		┢	+	
Orchard Bank Attn Bankruptcy Dept PO Box 19268 Portland, OR 97280		-						803.00
Account No.	T	T				T	T	
Pacific Bell c/o0 American Agencies 2158 W. 190th Street Torrance, CA 90509		-						275.00
Sheet no. <u>17</u> of <u>29</u> sheets attached to Schedule of				Subt	ota	ıl	$\dagger$	
Creditors Holding Unsecured Nonpriority Claims			(Total of t					4,147.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

CDEDITODIS NAME	C	Нι	sband, Wife, Joint, or Community	C	U N	Ī	5	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	N L L Q U L D A T E D	FUTE	7	AMOUNT OF CLAIM
Account No.				T	E			
Planet fitness 1163 E Ogden Ave, #405□□ Naperville, IL 60540		-			D			61.00
Account No.			Loan		Г	T		
PLS Financial Solutions 800 Jorie Blvd 2nd Floor Oak Brook, IL 60523		-						1,900.00
				-	L	╀	_	1,900.00
Account No.  Primus Automotive Finance P.O. Box 111897 Nashville, TN 37222		-						11,410.00
Account No.			Collection		Г	T		
Proactiv Solution Sko Brenner American, Inc. P.O. Box 230 Farmingdale, NY 11735-0230		-						65.88
Account No.		T	Collection		T	T	7	
Proactive c/o Dymacol Incorporated 3070 Lawson Blvd. P.O. Box 9017 Oceanside, NY 11572		-						99.84
Sheet no. <u>18</u> of <u>29</u> sheets attached to Schedule of				Subt			1	13,536.72
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	ze)	۱ (	10,000.12

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In re	Angelique Ashley	Case No
		Debtor

GD DD 1900 1911 191	C	Тн	usband, Wife, Joint, or Community	10	o Tu	) [	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	1 1 1 1 1 1	N L G I	U   [] N   I   [] Q   [] D   [] A   []	AMOUNT OF CLAIM
Account No.					N   A T   1 E		
Progressive Leasing 1521 W. Cameron Ave. West Covina, CA 91793-9917		-					1,600.00
Account No. 5305144		+	Collection for San Diego Gas		+	+	<u> </u>
Progressive Management Systems 1521 W. Cameron Avenue West Covina, CA 91793		-	ŭ				375.00
Account No.	$\dashv$	+	Medical Bill	-	+	$\dagger$	
Quest Diagnostic 1355 Mittel Blvd Wood Dale, IL 60191		-					30.00
Account No.		$^{+}$			+	$\dagger$	
Radiology Imagaing Collection Group P.O. Box 1074 Harvey, IL 60426		-					113.00
Account No. 482519		+	Collection for Western Dental		+	+	
Reliant Recovery Services 2210 E Rte 66 # 101 Glendora, CA 91740		-					230.00
Sheet no. 19 of 29 sheets attached to Schedu	le of		1	Su	bto	tal	0.040.00
Creditors Holding Unsecured Nonpriority Claims			(Total	of this	s pa	ige]	2,348.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley		Case No.	
_		Debtor	<del>-</del> /	

CDEDITORIS NAME	С	Hu	sband, Wife, Joint, or Community		C	U	D I	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	СОПШВТОК	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CIETS SUBJECT TO SETOFF, SO STATE	I ATM I	NTINGEN	ONLL QULDA		AMOUNT OF CLAIM
Account No.					Т	A T E D		
RJM Acquisition LLC PO Box 18006 Hauppauge, NY 11788-8806		-				D		112.00
Account No. 217903425104F	_	$\vdash$	Opened 5/19/05 Last Active 11/22/05				H	
Sallie Mae Po Box 9500 Wilkes-barre, PA 18773		-	Educational					0.00
Account No. 217903425103F			Opened 5/19/05 Last Active 11/22/05					
Sallie Mae Po Box 9500 Wilkes-barre, PA 18773		-	Educational					0.00
Account No. 217903425102F	_		Opened 1/26/05 Last Active 11/22/05					0.00
Sallie Mae Po Box 9500 Wilkes-barre, PA 18773		-	Educational					0.00
Account No. 217903425101F		f	Opened 1/26/05 Last Active 11/22/05				$\Box$	
Sallie Mae Po Box 9500 Wilkes-barre, PA 18773		-	Educational					0.00
Sheet no. 20 of 29 sheets attached to Schedule of		_	1	Sı	ubt	ota	.1	442.00
Creditors Holding Unsecured Nonpriority Claims			(	Total of th	is ]	pag	ge)	112.00

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In re	Angelique Ashley	Case No.
•		Debtor

CD ED TEODIG VALVE	С	Hu	sband, Wife, Joint, or Community	C	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	L	S	AMOUNT OF CLAIM
Account No. 2746024269003			Opened 3/01/10 Last Active 7/31/09	٦т	T E		
Salute Gold Card Jefferson Capital Systems 16 Mcleland Rd Saint Cloud, MN 56303		-	Collection				582.00
Account No. 7783760015044305	╁		Opened 6/04/08 Last Active 7/31/09		$\frac{1}{1}$		
Salute/utb Card Services Po Box 105555 Atlanta, GA 30348		-	Credit Card				0.00
Account No.	H				+	-	
San Diego Gas & Electric P.O. Box 2511 Santa Ana, CA 92799		-					324.00
Account No. 30000171321521000	╁		Opened 3/01/08 Last Active 1/28/10		$\frac{1}{1}$		324.00
Santander Consumer Usa 8585 N Stemmons Fwy Ste 1100-N Dallas, TX 75247		-	Automobile				5,884.00
Account No.				+	+		
SBC c/o American AGC 2158 W. 190th Street Torrance, CA 90509		-					57.00
Sheet no. 21 of 29 sheets attached to Schedule of				Sub	otot	al	0.047.00
Creditors Holding Unsecured Nonpriority Claims			(Total o	this	pa	ge)	6,847.00

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In re	Angelique Ashley	Case No	
_		Dehtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	9	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C   N   T   I   N   C   E   N   C   E   N   T   T   T   T   T   T   T   T   T	C	D I SP UTED	AMOUNT OF CLAIM
Account No. 927543853210006			Opened 12/01/05 Last Active 7/27/07	٦	E		
Slm Financial Corp Po Box 9500 Wilkes-barre, PA 18773		-	Educational				
					_		0.00
Account No. 1433140922056860  South Shore Hospital ATTN: Patient Accounts 8000 South Merril Chicago, IL 60617		-	Medical				191.00
Account No.	+	$\vdash$		_	+	+	
Ferleger & Associates 29 S. LaSalle Ste 300 Chicago, IL 60603			Representing: South Shore Hospital				Notice Only
Account No. 3970576013169		t	Loan		+		
Springleaf P.O. Box 64 Evansville, IN 47701-0064		-					684.00
Account No.	+	+			+	+	3500
American General Finance 1300C 14th St Meridian, MS 39301			Representing: Springleaf				Notice Only
Sheet no. 22 of 29 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	of		(Total	Sul of this			875.00

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In re	Angelique Ashley	Case No.	
-		Debtor	

	Гс	Тн	usband, Wife, Joint, or Community	С	Ιu	ΙD	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE OF A DAMAG BUOVEDED AND	CONTLNGEN	10	DISPUTED	AMOUNT OF CLAIM
Account No. 82587599			Opened 11/01/13	T	E D		
Sprint Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256		_	Collection				1,115.00
Account No.	1	t			t		
St Anthony Medical c/o Mutual Health Clc 2525 N Shadeland Indianapolis, IN 46219		_					200.00
Account No.						1	
St James c/o Alliance One 1684 Woodlands Dr Maumee, OH 43537		-					6,217.00
Account No.	$\top$	t			t		
State of Illinois Dpt. of Employemn 837 West 119 Street Chicago, IL 60643		-					852.00
Account No.	+	+		+	+	+	552.30
Sullivan Urgent Aid Center P.O. Box 87844 Carol Stream, IL 60188-7844		-					255.00
Sheet no. 23 of 29 sheets attached to Schedule of	of	_		Sub	tota	ıl	0.000.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	8,639.00

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In re	Angelique Ashley	Case No.	
-		Debtor	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	H	TO DATE CLAIM WAS INCURRED AND	CONTI	UNLL	D I S P	
AND ACCOUNT NUMBER (See instructions above.)	T O R	C	CONSIDERATION FOR CLAIM. IF CLAIM	NGEN	QULDA	I SPUTED	AMOUNT OF CLAIM
Account No.				]⊤	T E		
Sullivant Urgent Aid Center PO Box 87844 Carol Stream, IL 60188		-					290.00
Account No.	t	t		$\vdash$		$\vdash$	
Suzanne K. Cooperman 307 N. Michigan Avenue Suite 1010 Chicago, IL 60601		-					
							20.00
Account No.			Cellular Service				
T-Mobile Bankruptcy Dept P.O. Box 53410 Bellevue, WA 98015		-					
25.0.0.00, 17.0.00.0							982.00
Account No.						T	
Target Corp P.O. Box 960 Minneapolis, MN 55440		-					
							25.00
Account No.			Overdraft				
TCF National Bank 800 Burr Ridge Parkway Bankruptcy Department Hinsdale, IL 60521		-					
, missais, iL 5552 i							423.00
Sheet no. 24 of 29 sheets attached to Schedule of	-			Sub			1,740.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ze)	l ' ' ' ' '

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In re	Angelique Ashley	Case No.
•		Debtor

	С	Ни	sband, Wife, Joint, or Community	Ic	: Lu	Гр	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	O N T I N G E N	1,	DISPUTED	AMOUNT OF CLAIM
Account No.				T	E D		
The Payday loan 4031 B W 183rd Street Country Club Hills, IL 60478		-					2,685.00
Account No.			Collection	+	+	$\frac{1}{1}$	_,,,,,,,,
TransAmerica PO Box 2677 Terminal Annex Los Angeles, CA 90051		-					381.85
Account No.				$^{+}$			
Trans America Agency Network 100 Light Street B2 813 Baltimore, MD 21202			Representing: TransAmerica				Notice Only
Account No. 278689			Collection for Maric College	$\dagger$	+	$^{\perp}$	
Universal Credit Corp PO Box 23815 San Diego, CA 92193		-					1,969.00
Account No.		$\vdash$	Medical	+	+	+	, , ,
University of Chicago 5801 Ellis Ave. Chicago, IL 60637		-					2,261.81
Sheet no. 25 of 29 sheets attached to Schedule of	<u> </u>	1		Sub	tot:	1 a1	_,
Creditors Holding Unsecured Nonpriority Claims			(Total of				7,297.66

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley		Case No.	
_		Debtor	<del>-</del> /	

	С	Тни	sband, Wife, Joint, or Community		сΤ	u l	D I	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		CONFLAGEN	UNLIQUIDAT	D I SPUTED	AMOUNT OF CLAIM
Account No.			Medical		Т	T E D		
University of Chicago Medical Cente 15965 Collections Center Dr. Chicago, IL 60693		-						4 4 2 2 7 0
Account No. '	╁	-			+	+	1	4,133.79
University of Chicago Medicine c/o M3 Financial Services, Inc. P.O. Box 7230 Westchester, IL 60154		-						4,134.00
Account No.	+				+	$\dashv$	$\dashv$	
University of Chicago Phy. Group P.O. Box 75307 Collections Chicago, IL 60675-5307		-						393.00
Account No. 9032800685	t		Opened 12/01/09		1	1	+	
University Of Phoenix 4615 E Elwood St Fl 3 Phoenix, AZ 85040		-	Unsecured					857.00
Account No.	╁	$\vdash$	Collection	-	+	$\dashv$	$\dashv$	
US Cellular Attn: Write Off Department P.O. Box 7835 Madison, WI 53707-7835		-						1,523.51
Sheet no. <u>26</u> of <u>29</u> sheets attached to Schedule of				Ç,,	hte.	otal	$\dashv$	1,020.01
Creditors Holding Unsecured Nonpriority Claims			(Total				.)	11,041.30

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley		Case No.	
-		Debtor	<del>-</del> /	

		_				—	_	-
CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community		CO	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLA	IM	NT I NG ENT	LLQULDA	DISPUTED	AMOUNT OF CLAIM
Account No. 2179034252		T	Opened 10/03/02 Last Active 12/08/05		Ť	T		
Us Dep Ed Po Box 7202 Utica, NY 13504		-	Educational			E D		0.00
Account No. 5370000000356321	T	T			T	┪	T	
US Department of Veteran's Affairs 3001 Green Bay Road North Chicago, IL 60064		-						
								54.00
Account No. 2830350144741577  Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707		-	Opened 1/21/10 Last Active 6/30/15 Educational					0.00
Account No. 2830350144740577  Us Dept Of Ed/glelsi 2401 International Madison, WI 53704		-	Opened 1/20/09 Last Active 6/30/15 Educational					0.00
Account No. 70679202	T	T	Collection			T	T	
Valentine & Kebartas, Inc. P.O. Box 325 Lawrence, MA 01842-0625		-						205.00
Sheet no. 27 of 29 sheets attached to Schedule of			•	S	Sub	tota	ıl	050.00
Creditors Holding Unsecured Nonpriority Claims			(To	tal of th	his	pag	ge)	259.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Hı	usband, Wife, Joint, or Community	C	U	D	Τί	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	N L L Q U L D A T	D I S P U T E D	- 1	AMOUNT OF CLAIM
Account No.				<b> </b> ™	T E D			
Village of Dolton Dept. of Revenue 14030 Park Avenue Dolton, IL 60419		-			D			100.00
Account No.		Г	Collection			Г	T	
Village of Evergereen Park 9420 South Kedzie Avenue Traffic Compliance Admin Evergreen Park, IL 60805		-						250.00
Account No.		T	Collection			T	†	
Village Of Hoffman Estates Tele-collection System 2 Transam Plaza Dr., Suite 3 Oakbrook Terrace, IL 60181		-						100.00
Account No.		Т	Collection			T	†	
Village of Lynwood 21460 Lincoln Highway Chicago Heights, IL 60411		-						100.00
Account No.	T	T				T	†	
Village of Riverdale Bureau of Parking Enforcement 157 West 144th Street Riverdale, IL 60827		-						250.00
Sheet no. <u>28</u> of <u>29</u> sheets attached to Schedule of	<u>.                                    </u>	_	1	Subt	ota	Ш al	$\dagger$	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				, [	800.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Angelique Ashley		Case No.	
-		Debtor	<del>-</del> /	

	1	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	T_	1	٠,	_ 1	
CREDITOR'S NAME,	ŏ	ı	usband, Wife, Joint, or Community	۱۵	N	Hi	ויו	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT				AMOUNT OF CLAIM
Account No. 4307639			Opened 11/01/06 Last Active 8/01/07	7	T E		ſ	
Vsac Loan Services Attn: Bankruptcy Po Box 2000 Winooski, VT 05404		-	Educational		D			0.00
Account No.				T				
Washington Mutal Capital Management Service 726 Exchange, Suite 700 Buffalo, NY 14210		-						112.00
Account No.	┢			+	+	+	+	
Western Dental P.O. Box 1352 Englewood, CO 80150		-						
								381.00
Account No.								
Account No.								
Sheet no. 29 of 29 sheets attached to Schedule of			(Total of t	Sub			<u>,                                    </u>	493.00
Creditors Holding Unsecured Nonpriority Claims			(10tai oi t		pa; Γot		1	
			(Report on Summary of So				) [	196,507.32

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B6G (Official Form 6G) (12/07)

In re	Angelique Ashley	Case No.	
-		Debtor ,	

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-32849 Doc 1 Filed 09/26/15 Entered 09/26/15 11:57:55 Desc Main Document Page 46 of 80

B6H (Official Form 6H) (12/07)

In re	Angelique Ashley	Case No
-		,
		Debtor

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Sill	in this information to identify your c	200							
	otor 1 Angelique A								
	otor 2								
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number 		-				nded filing ement showi	ng post-petitio following date:	•
0	fficial Form B 6I						D/ YYYY		
S	chedule I: Your Inc	ome				WIIWI / DI	2/ 1111		12/13
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  11: Describe Employment	ır spouse is not filing w	ith you, do not incl	ude info	rmati	on about your	spouse. If n	nore space is	needed,
1.	Fill in your employment information.		Debtor 1			Debte	or 2 or non-	filing spouse	
	If you have more than one job, attach a separate page with	Employment status	Employed				nployed		
	information about additional	,,	☐ Not employed			□ No	ot employed		
	employers.	Occupation	Customer Serv	ice					
	Include part-time, seasonal, or self-employed work.	Employer's name	GM Warehouse	Inc					
	Occupation may include student or homemaker, if it applies.	Employer's address	17 W 729A Roo Villa Park, IL 60		Rd				
		How long employed t	here? 1 year						
Par	t 2: Give Details About Mor	nthly Income							
<b>Esti</b> spou	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have mee space, attach a separate sheet to	ate you file this form. If			·		erson on the	·	-
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,416.6	<b>6</b> \$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.0	<u> </u>	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	4,416.66	\$	N/A	

Deb	tor 1	Angelique Ashley	_	Case	number (if known)			
	Cop	by line 4 here	4.	For	Debtor 1 4,416.66		otor 2 or ng spouse N/A	
5.	List	all payroll deductions:						
J.	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$ \$ \$ \$ \$	572.91 0.00 0.00 0.00 61.01 0.00 0.00	\$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
6.	5h.	Other deductions. Specify:  I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— <sup>5h.+</sup> 6.	* \$ *	0.00 633.92	+ \$ \$	N/A N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,782.74	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a depender regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8a. 8b. <b>nt</b> 8c. 8d. 8e.	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	;	3,782.74 + \$_	N	<b>I/A</b> = \$3	3,782.74
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedulude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no cify:	ur deper		. •	ted in Sch	edule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certilies				a, if it		3,782.74
13.	Do	you expect an increase or decrease within the year after you file this forn No.	m?				Combine monthly	

Yes. Explain: Debtor dies some tutoring work on the side, but it is not consistent.

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Fill in	this informa	ation to identify yo	our caso:					
Debtor		Angelique A				Ch	eck if this is:	
Debtor	. 2						An amended filing	wing post-petition chapter
	se, if filing)					Ц		the following date:
United	States Bankr	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case r	number wn)						A separate filing for 2 maintains a separate	or Debtor 2 because Debto arate household
Offi	icial Fo	rm B 6J						
		J: Your	_ Expen	ises				12/1
Be as	complete nation. If m	and accurate as	s possible. eded, atta	. If two married people and the community of the community is a second to the community of				
Part 1	Description Description	ribe Your House	hold					_
ı	No. Go to	o line 2.	in a separ	ate household?				
	□и	О		parate Schedule J.				
2. <b>[</b>	Do you hav	e dependents?	□ No					
	Do not list D and Debtor 2		Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents'				Son		9	□ No ■ Yes
					Daughter		15	□ No ■ Yes
								□ No □ Yes
								□ No □ Yes
e	expenses o	penses include f people other t d your depende	han 🖂	No Yes				Li Yes
exper	nate your ex		our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the va		h assistance an		government assistance i cluded it on <i>Schedule I:</i> `			Your exp	enses
		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4.	\$	1,240.00
ŀ	f not includ	ded in line 4:						
4	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.		0.00
		maintenance, re	pair, and ι	ıpkeep expenses		4c.	\$	25.00
		owner's associat				4d.	·	0.00
5. <i>I</i>	Additional r	nortgage payme	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00

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Angelique Ashley	Case num	ber (if known)	1
ities:			
	6a.	\$	80.00
Water, sewer, garbage collection	6b.	\$	0.00
Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	\$	0.00
od and housekeeping supplies	<del></del> 7.	\$	500.00
			75.00
		·	150.00
e e			100.00
		· —	75.00
•		Ψ	75.00
	12.	\$	350.00
	13.	\$	75.00
		·	40.00
			40.00
	15a.	\$	0.00
. Health insurance	15b.	\$	0.00
		·	117.00
		·	0.00
· · · · · · · · · · · · · · · · · · ·		<u> </u>	0.00
	16.	\$	0.00
		*	0.00
	17a.	\$	400.00
			0.00
		·	240.00
· · ·			100.00
			100.00
lucted from your pay on line 5. Schedule I. Your Income (Official Form 61)	18.	\$	0.00
		\$	0.00
	19.	·	
		our Income.	
			0.00
			0.00
Property, homeowner's, or renter's insurance	20c.	\$	0.00
			0.00
		·	0.00
		·	0.00
er. Specify.			0.00
ur monthly expenses. Add lines 4 through 21.	22.	\$	3,767.00
result is your monthly expenses.			<u> </u>
culate your monthly net income.			
	23a.	\$	3,782.74
	23b.	-\$	3,767.00
		· ———	
. Subtract your monthly expenses from your monthly income.			4==4
The result is your monthly net income.	23c.	\$	15.74
			e or decrease because of a
Yes. Car payent has been estimated			
	Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:  od and housekeeping supplies ildcare and children's education costs whing, laundry, and dry cleaning sonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance. not include insurance deducted from your pay or included in lines 4 or 20.  a. Life insurance b. Health insurance c. Vehicle insurance. d. Other insurance. Specify:  tes. Do not include taxes deducted from your pay or included in lines 4 or 20.  actify:  tes. Do not include taxes deducted from your pay or included in lines 4 or 20.  actify:  tes. Do not include taxes deducted from your pay or included in lines 4 or 20.  actify:  a. Car payments for Vehicle 1  b. Car payments for Vehicle 2  c. Other. Specify:  furniture loan  ur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  ter payments you make to support others who do not live with you.  actify:  ter real property expenses not included in lines 4 or 5 of this form or on Schela.  Mortgages on other property  a. Real estate taxes  b. Property, homeowner's, or renter's insurance  d. Maintenance, repair, and upkeep expenses  chomeowner's association or condominium dues  ter: Specify:  ur monthly expenses. Add lines 4 through 21.  teresult is your monthly expenses.  Culate your monthly expenses from line 22 above.  c. Subtract your monthly expenses from line 22 above.  Subtract your monthly expenses from line 22 above.  Subtract your monthly expenses from line 22 above.  Subtract your monthly expenses from your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your example, do you expect to finish paying for your car l	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: 6d and housekeeping supplies Idicare and children's education costs 8. Idicare and children's education costs 8. Idicare and children's education costs 9. Insportation. Include gas, maintenance, bus or train fare. Include car payments. Include insurance deducted from your pay or included in lines 4 or 20. If insurance. Include insurance deducted from your pay or included in lines 4 or 20. If it insurance. Include insurance specify: Identify insurance specify: Include you wake to support others who do not live with you. Increase property expenses not included in lines 4 or 5 of this form or on Schedule I: Ya. Increase property expenses not included in lines 4 or 5 of this form or on Schedule I: Ya. Increase property expenses not included in lines 4 or 5 of this form or on Schedule I: Ya. Increase property expenses not included in lines 4 or 5 of this form or on Schedule I: Ya. Increase property expenses on the repression of the repression of the repres	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother, Specify: Gat and housekeeping supplies Idicare and children's education costs Bidicare and children's education

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B6 Declaration (Official Form 6 - Declaration). (12/07)

### **United States Bankruptcy Court** Northern District of Illinois

Angelique Ashley			Case No.	
		Debtor(s)	Chapter	7
DECLARATION C	CONCERN	VING DEBTOR'S S	CHEDUL	ES
DECLARATION UNDER	PENALTY (	OF PERJURY BY INDI	VIDUAL DE	BTOR
I declare under penalty of periury t	hat I have re	ad the foregoing summar	v and schedul	les, consisting of 45
				.es, consisting of
Sentember 26 2015	Cianatura	/s/ Angeligue Ashley		
Ochtember 20, 2010	Signature			
	DECLARATION OF DECLARATION UNDER	DECLARATION CONCERN  DECLARATION UNDER PENALTY Of I declare under penalty of perjury that I have reasheets, and that they are true and correct to the best of my	Declaration concerning debtor's S  Declaration under penalty of perjury that I have read the foregoing summar sheets, and that they are true and correct to the best of my knowledge, information	Declaration concerning debtor(s)  Declaration concerning debtor's schedul declare under penalty of perjury that I have read the foregoing summary and schedul sheets, and that they are true and correct to the best of my knowledge, information, and belief.  September 26, 2015  Signature /s/ Angelique Ashley

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

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B7 (Official Form 7) (04/13)

### **United States Bankruptcy Court Northern District of Illinois**

In re	Angelique Ashley		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$37,727.81 2015 YTD: Employment Income \$42,317.00 2014: Employment Income \$37,247.00 2013: Employment Income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$12,220.00 2014: Unemployment

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#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF CREDITOR OR SELLER

Greater Chicago Finance Company 8331 West Roosevelt Road Forest Park, IL 60130 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 9/2/15

DESCRIPTION AND VALUE OF PROPERTY 2003 Volvo XC70

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Zalutsky & Pinski, Ltd. 111 W. Washington Suite 1550 Chicago, IL 60602 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 9/15 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$117.00

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

Bank of America P.O. Box 53137 Phoenix, AZ 85072-3137 TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Savings- 9/15

AMOUNT AND DATE OF SALE OR CLOSING

zero balance

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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#### 15. Prior address of debtor

None 

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

DATES OF OCCUPANCY **ADDRESS** NAME USED Current Same 7/1/14- present

**9023 S IOOMIS** Same 5 years prior

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

DATE OF

NAME AND ADDRESS OF **ENVIRONMENTAL** SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** 

SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-ID, NO

TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

ENDING DATES

Midwest Property Connectors Same as Residence Real Estate Investing 9/14- present

Angelique Ashley Same as Residence

Tutoring and mentoring 2005- present

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

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#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	September 26, 2015	Signature	/s/ Angelique Ashley
			Angelique Ashley
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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## **United States Bankruptcy Court**Northern District of Illinois

	Northern District of Illino	IS	
In re Angelique Ashley		Case No.	<u></u>
	Debtor(s)	Chapter	7
PART A - Debts secured by property	INDIVIDUAL DEBTOR'S STATEM y of the estate. (Part A must be fully contributed in additional pages if necessary.)		
Property No. 1			
Creditor's Name: -NONE-	Describe Prop	perty Securing Debt	:
Property will be (check one): ☐ Surrendered	☐ Retained		
If retaining the property, I intend to (che ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		U.S.C. § 522(f)).	
Property is (check one): ☐ Claimed as Exempt	☐ Not claimed	d as exempt	
PART B - Personal property subject to u Attach additional pages if necessary.)	unexpired leases. (All three columns of Par	t B must be complete	ed for each unexpired lease.
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be U.S.C. § 365 ☐ YES	e Assumed pursuant to 11 $5(p)(2)$ :
I declare under penalty of perjury tha personal property subject to an unexp	t the above indicates my intention as to ired lease.	any property of my	estate securing a debt and/or
Date <b>September 26, 2015</b>	Signature /s/ Angelique A		

Debtor

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## **United States Bankruptcy Court Northern District of Illinois**

	1101 0	nern District of Innior	.5		
In r	re Angelique Ashley		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	y, or agreed to be paid	to me, for services re-	
	For legal services, I have agreed to accept		\$	117.00	
	Prior to the filing of this statement I have received			117.00	
	Balance Due			0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compen	nsation with any other person	n unless they are mem	bers and associates of	my law firm.
			•		•
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				ıw firm. A
5.	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspec	cts of the bankruptcy of	ase, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering the preparation and filing of any petition, schedules, stateric. Representation of the debtor at the meeting of creditors.</li> <li>d. [Other provisions as needed] Negotiations with secured creditors to represent the reasonable of the reasonab</li></ul>	ment of affairs and plan which is and confirmation hearing, a duce to market value; ex its as needed; preparatio	th may be required; and any adjourned hea	rings thereof;	iling of
	Outside counsel may be employed under	_	aid by our firm.		
7.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc			y proceeding.	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement fo	r payment to me for re	epresentation of the de	ebtor(s) in
Date	ted: September 26, 2015	/s/ Thomas P Tw	omey		
		Thomas P Twon	ney 6273191		
		Zalutsky & Pinsl			
		111 W. Washing Suite 1550	ton		
		Chicago, IL 6060	)2		
			ax: 312-782-0483		

admin@ZAPLawFirm.com

### PRE-PETITION CHAPTER 7 RETAINER AGREEMENT

herein referred to as the Debtor(s) agree(s) to retain the law firm of Zalutsky & Pinski, Ltd., for the limited purpose of providing legal service related to an including; providing an evaluation of the undersigned's financial situation and an explanation of available options, including Chapter 13. After which Zalutsky & Pinski, Ltd., agreed to prepare and file Debtor(s)' petition and/or schedules with the Clerk of the Bankruptcy Court. In addition to the legal services provided, Zalutsky & Pinski, Ltd., agrees to obtain a credit report on behalf of the Debtor(s) as well as assist in the procurement of mandatory credit counseling. Zalutsky & Pinski, Ltd.'s representation is completed and any and all agreements, including but not limited to this one are terminated upon the filing of Debtor(s)' Bankruptcy petition and/or schedules.

Debtor(s) agrees to pay a retainer in the amount of \$5000 to Zalutsky & Pinski, Ltd., for the above stated pre-filing legal services, related expenses, and court costs. It is understood that any monies paid for said services, related expenses, and court costs is nonrefundable once received by Zalutsky & Pinski, Ltd., regardless of whether or not a petition is filed with the Bankruptcy Court.

It is also understood that both Debtor(s) and Zalutsky & Pinski, Ltd., enter this agreement with the intention that upon the completion/termination of services contracted for under this agreement, Debtor(s) will enter into a second retainer agreement with Zalutsky & Pinski, Ltd., for post-filing bankruptcy related services. It is understood that neither Debtor(s) nor Zalutsky & Pinski, Ltd., are under any further obligation to each other once the services contemplated under this agreement have been terminated and/or the Bankruptcy petition has been filed with the Court. Debtor(s) retains the ability to represent himself or is free to obtain other representation for services to be rendered subsequent to the filling of the Chapter 7 petition. If Debtor(s) intend(s) to have Zalutsky & Pinski, Ltd., as their legal representative subsequent to the petition being filed, an additional retainer agreement must be entered into at that time.

X Joint Debtor
Date

Date

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

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B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court Northern District of Illinois**

	North	nern District of Illinois		
In re	Angelique Ashley		Case No.	
		Debtor(s)	Chapter 7	7
	CERTIFICATION OF N UNDER § 342(b)	OTICE TO CONSUM	`	S)
Code.	Cer I (We), the debtor(s), affirm that I (we) have received	tification of Debtor ived and read the attached r	notice, as required by	§ 342(b) of the Bankruptcy
Angel	lique Ashley	${ m X}$ /s/ Angelique	Ashley	September 26, 2015
Printe	d Name(s) of Debtor(s)	Signature of I	Debtor	Date
Case I	No. (if known)	X		
		Signature of J	oint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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### United States Bankruptcy Court Northern District of Illinois

		Northern District of Illinois		
In re	Angelique Ashley		Case No.	
		Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR M	<b>IATRIX</b>	
		Number of	Creditors:	148
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and	correct to the best of my
Date:	September 26, 2015	/s/ Angelique Ashley Angelique Ashley Signature of Debtor		

Aarons Furniture 2231 E 95th St Chicago, IL 60617

Aarons Sales & Lease 122 S. Bolingbrook Drive Bolingbrook, IL 60440

Accelerated Rehab Center LTD 24014 Renwick Road Plainfield, IL 60544

Acs/bank Of America 501 Bleecker St Utica, NY 13501

Advocate Health Care 836 W. Wellington Avenue Chicago, IL 60657-5193

AFLAC 1932 WYNNTON ROAD Columbus, GA 31999

Allstate 75 Executive Hudson, OH 44237

Alverno Parkway Institute Credtrs Coll Po Box 63 Kankakee, IL 60901

American Express
P.O. Box 360002
Ft. Lauderdale, FL 33336-0002

American General Finance 1300C 14th St Meridian, MS 39301

Apollo Group P.O. Box 25727 Shawnee Mission, KS 66225 APPLIED BANK PO BOX 17120 Wilmington, DE 19886

Applied Card Bank Attention: Bankruptcy Po Box 17125 Wilmington, DE 19850

Army/Air Force Exchange P.O. Box 650410 Dallas, TX 75265-0410

Ascension Services, Inc. P.O. Box 210278 Bedford, TX 76095

AT&T P.O. Box 8212 Aurora, IL 60572-8212

AUM 135 S. LaSalle St. Dept 8011 Chicago, IL 60674

Ball State Universityar1 Security Credit System 622 Main St Ste 301 Buffalo, NY 14202

Black Enterprise National Publication Billing Servic 1525 S Escondido Blvd., Ste D Escondido, CA 92025

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cash America 1600 West 7th Street Fort Worth, TX 76102 CD One Price Cleaners P.O. Box 213 Bankruptcy Dept Streator, IL 61364

Chase P.O. Box 52195 Phoenix, AZ 85072-2195

Chicago Christian Council c/o Receivables Management 18241 West St. Lansing, IL 60438

Chicago Cosmetic Surgery and Derm 2340 N. Clybourn Chicago, IL 60614

Citistudntln Po Box 95 Sioux Falls, SD 57117

Citistudntln Po Box 95 Sioux Falls, SD 57117

City of Chicago Department of Revenue 121 N. LaSalle St. Rm. 107A Chicago, IL 60602

Comcast c/o Credit Protection Association 13355 Noel Road Dallas, TX 75240

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Comprehensive Imaging Assoc C/O CCSI PO BOX 10428 Merrillville, IN 46411 Continental Finance PO BOX 30311 Tampa, FL 33630

DEMG 1734 N Long Chicago, IL 60639

DFAS-CL 1240 E 9th St Cleveland, OH 44199

Diners cITIBANK sd P.O. Box 6009 The Lakes, NM 88901

Dpt Ed/slm
Po Box 9635
Wilkes Barre, PA 18773

Dpt Ed/slm
Po Box 9635
Wilkes Barre, PA 18773

Dpt Ed/slm
Po Box 9635
Wilkes Barre, PA 18773

Dpt Ed/slm
Po Box 9635
Wilkes Barre, PA 18773

Duvera Billing P.O. Box 2549 Carlsbad, CA 92018

Emergency Medical OPhy of Cook Cty 900 Oakmont Lane Ste 200 Westmont, IL 60559

Emp Of Cook County Llc Commonwealth Financial 245 Main Street Scranton, PA 18519 Fair Collections & Outsourcing 12304 Baltimore Ave Suite E Beltsville, MD 20705

Ferleger & Associates 29 S. LaSalle Ste 300 Chicago, IL 60603

Fingerhut 16 McLeLand Road Saint Cloud, MN 56303-2198

First Family Financial Svcs 721 Front St Meridian, MS 39301

First National Bank of Marin P O Box 80015 Bankruptcy Dept. Los Angeles, CA 90080-0015

First Premeir Bank Post Office Box 5147 Bankruptcy Department Sioux Falls, SD 57117-5147

Fitness Magazine 1716 Locust St Des Moines, IA 50309-8023

Flexpay Plus Monterey Collection Sv 4095 Avenida De La Oceanside, CA 92056

Ford Credit PO Box 6508 Mesa, AZ 85216

Girl Scouts of Greater Chicago 222 S Riverside Plaza Ste 2120 Chicago, IL 60606 Great Lakes Higher Education 2401 International Lane Madison, WI 53701

Gtr Chgo Fin 8331 W Roosevelt R Forest Park, IL 60130

Gtr Chgo Fin 8331 W Roosevelt R Forest Park, IL 60130

H & R Block
120 W. 87th St.
Chicago, IL 60620

Harvard Collection Harvard Collection Services 4839 N Elston Avenue Chicago, IL 60630

Hidden Pictures Playground PO BOX 4002862 Des Moines, IA 50340

Hoosier Heathwise PO BOX 171379 Salt Lake City, UT 84117

Household/Orchard Bank C/O Midland Credit Mgmt PO BOX 939019 San Diego, CA 92193

Illinis Dept of Healthcare and Family Services P.O. Box 19405 Springfield, IL 62794

Illinois Secretary of State Safety and Financial Responsibility 2701 S. Dirksen Pkwy Springfield, IL 62723 Illinois Tollways 2700 Ogden Ave. Downers Grove, IL 60515

Impenal Parking P.O. Box 369 Concord, CA 94522

Ingalls Memorial Hospital P.O. Box 75608 Chicago, IL 60675-5608

Innovative Merchant Solutions Consolidated Rcvy Grp 425 W 5th Ave Ste 103 Escondido, CA 92025

Jewels by Park Lane c/o World-Wide Recovery Services Inc., 3100 S. Wells St. Chicago, IL 60616

Kahuna Payment Solutions 801 W Chestnut St Suite C Bloomington, IL 61701

Kinney Closed 438 East 75th Street Chicago, IL 60619

LA Fitness P.O. Box 51355 Irvine, CA 92619-1355

LJ Ross P.O. Box 1838 Ann Arbor, MI 48104

Lorch Diamond Center 1701 McFarland Blvd E # 199 Tuscaloosa, AL 35404 Mansard Ltd. 315 W. Bedford Morris, IL 60450

Marshalls PO BOX 9382 Framingham, MA 01701

Mazda American Credit Dept. 5558901 P.O. Box 550000 Detroit, MI 48255

Mazda American Credit 1 S Limestone St Ste 100 Springfield, OH 45502

MEA Sullivan PO BOX 5990, DEPT 20-6003 Carol Stream, IL 60197

Mea-Sullivan Commonwealth Financial 245 Main Street Scranton, PA 18519

Medical Reimbursement of America 15234 South Harlem Avenue Lower Level Orland Park, IL 60462

Meijer P.O. Box 1 Grand Rapids, MI 49501

Merchants Recovery Bureau 3817 Harrison Ave. Cincinnati, OH 45211

Mid- American PSYCH & COUNS 1170 E. Belvidere Rd; #203 Grayslake, IL 60030

Midland Credit Management P.O. Box 939019 San Diego, CA 92193-9019

Mwstrn Fincl 8100 West 159th St Orland Park, IL 60462

Navient Po Box 9500 Wilkes Barre, PA 18773

Nexcard 3911 S Walton Walker Blvd Dallas, TX 75265

Nicor P.O. Box 2020 Aurora, IL 60507-2020

Northwestern M.F. Foundation Inc. 680 North Lake Shore Drive Chicago, IL 60661

Norwood University

Orchard Bank Attn Bankruptcy Dept PO Box 19268 Portland, OR 97280

Pacific Bell c/o0 American Agencies 2158 W. 190th Street Torrance, CA 90509

Planet fitness 1163 E Ogden Ave, #405□□ Naperville, IL 60540

PLS Financial Solutions 800 Jorie Blvd 2nd Floor Oak Brook, IL 60523 Primus Automotive Finance P.O. Box 111897 Nashville, TN 37222

Proactiv Solution Sko Brenner American, Inc. P.O. Box 230 Farmingdale, NY 11735-0230

Proactive c/o Dymacol Incorporated 3070 Lawson Blvd. P.O. Box 9017 Oceanside, NY 11572

Progressive Finance 11629 S 700 East Ste. 250 Draper, UT 84020

Progressive Leasing 1521 W. Cameron Ave. West Covina, CA 91793-9917

Progressive Management Systems 1521 W. Cameron Avenue West Covina, CA 91793

Quest Diagnostic 1355 Mittel Blvd Wood Dale, IL 60191

Radiology Imagaing Collection Group P.O. Box 1074 Harvey, IL 60426

Reliant Recovery Services 2210 E Rte 66 # 101 Glendora, CA 91740

RJM Acquisition LLC PO Box 18006 Hauppauge, NY 11788-8806 Sallie Mae Po Box 9500 Wilkes-barre, PA 18773

Sallie Mae Po Box 9500 Wilkes-barre, PA 18773

Sallie Mae Po Box 9500 Wilkes-barre, PA 18773

Sallie Mae Po Box 9500 Wilkes-barre, PA 18773

Salute Gold Card Jefferson Capital Systems 16 Mcleland Rd Saint Cloud, MN 56303

Salute/utb Card Services Po Box 105555 Atlanta, GA 30348

San Diego Gas & Electric P.O. Box 2511 Santa Ana, CA 92799

Santander Consumer Usa 8585 N Stemmons Fwy Ste 1100-N Dallas, TX 75247

SBC c/o American AGC 2158 W. 190th Street Torrance, CA 90509

Slm Financial Corp Po Box 9500 Wilkes-barre, PA 18773 South Shore Hospital ATTN: Patient Accounts 8000 South Merril Chicago, IL 60617

Springleaf P.O. Box 64 Evansville, IN 47701-0064

Sprint Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

St Anthony Medical c/o Mutual Health Clc 2525 N Shadeland Indianapolis, IN 46219

St James c/o Alliance One 1684 Woodlands Dr Maumee, OH 43537

State of Illinois Dpt. of Employemn 837 West 119 Street Chicago, IL 60643

Sullivan Urgent Aid Center P.O. Box 87844 Carol Stream, IL 60188-7844

Sullivant Urgent Aid Center PO Box 87844 Carol Stream, IL 60188

Suzanne K. Cooperman 307 N. Michigan Avenue Suite 1010 Chicago, IL 60601

T-Mobile Bankruptcy Dept P.O. Box 53410 Bellevue, WA 98015 Target Corp P.O. Box 960 Minneapolis, MN 55440

TCF National Bank 800 Burr Ridge Parkway Bankruptcy Department Hinsdale, IL 60521

The Payday loan 4031 B W 183rd Street Country Club Hills, IL 60478

Trans America Agency Network 100 Light Street B2 813 Baltimore, MD 21202

TransAmerica PO Box 2677 Terminal Annex Los Angeles, CA 90051

Universal Credit Corp PO Box 23815 San Diego, CA 92193

University of Chicago 5801 Ellis Ave. Chicago, IL 60637

University of Chicago Medical Cente 15965 Collections Center Dr. Chicago, IL 60693

University of Chicago Medicine c/o M3 Financial Services, Inc. P.O. Box 7230 Westchester, IL 60154

University of Chicago Phy. Group P.O. Box 75307 Collections Chicago, IL 60675-5307

University Of Phoenix 4615 E Elwood St Fl 3 Phoenix, AZ 85040

US Cellular Attn: Write Off Department P.O. Box 7835 Madison, WI 53707-7835

Us Dep Ed Po Box 7202 Utica, NY 13504

US Department of Veteran's Affairs 3001 Green Bay Road North Chicago, IL 60064

Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707

Us Dept Of Ed/glelsi 2401 International Madison, WI 53704

Valentine & Kebartas, Inc. P.O. Box 325 Lawrence, MA 01842-0625

Village of Dolton Dept. of Revenue 14030 Park Avenue Dolton, IL 60419

Village of Evergereen Park 9420 South Kedzie Avenue Traffic Compliance Admin Evergreen Park, IL 60805

Village Of Hoffman Estates Tele-collection System 2 Transam Plaza Dr., Suite 3 Oakbrook Terrace, IL 60181 Village of Lynwood 21460 Lincoln Highway Chicago Heights, IL 60411

Village of Riverdale Bureau of Parking Enforcement 157 West 144th Street Riverdale, IL 60827

Vsac Loan Services Attn: Bankruptcy Po Box 2000 Winooski, VT 05404

Washington Mutal Capital Management Service 726 Exchange, Suite 700 Buffalo, NY 14210

Western Dental P.O. Box 1352 Englewood, CO 80150